

## Doulas may indicate failings in patient care, warns doctor

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The presence of doulas (paid birth assistants) during labour may alter the doctor-patient dynamic and can compromise communication and therefore patient care, warns a doctor in the *British Medical Journal* today.

Furthermore, the need for doulas implies a failing of medical and midwifery services and also the support provided by family and friends, says Dr Abhijoy Chakladar who was working at Worthing Hospital in West Sussex when he first encountered a doula.

He describes how his first encounter with a doula on the labour ward compromised his communication during an anaesthetic consultation and therefore compromised the care he delivered. "I found myself disconcerted by the doula's presence as I was unfamiliar with her role," he says. "In retrospect, I should have confirmed everyone's roles and established ground rules acceptable to all involved on entering the situation."

Hired birthing partners are unregulated, not part of clinical obstetric teams, and therefore should not be involved in the making of clinical decisions. There is no nationally recognised certification for doulas and it is possible to work without training. The Nursing and Midwifery Council recognises doulas solely as <a href="emotional support">emotional support</a> for mothers and as unqualified persons they cannot substitute for registered midwives.

There are approximately 1000 doulas working in the UK offering



packages including antenatal visits, labour, postnatal visits, and on-call periods, charging between £400 and £900. In 2005, there were an estimated 100,000 doula-supported births in the USA.

As the trend grows here, the author wonders whether the doula business is actually necessary or whether it is exploiting for profit unspoken fears over NHS perinatal care and the seemingly limitless market for birth-related products and services,

Dr Chakladar says he is disappointed by the real or perceived need for doulas. He believes that availability of this commercial service implies that current social structures do not support pregnant couples adequately and that healthcare professionals may not be able to support their patients as they would like to.

Source: British Medical Journal

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